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I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner of Patents, Washington, D.C. 20231.

Typed or Printed Name Cindy Hoang
Signature Cindy Hoang Date 10-10-2001

TECH CENTER 1600/2900
OCT 22 2001

**NOTICE APPEAL FROM THE
EXAMINER TO THE BOARD
OF APPEALS AND
INTERFERENCES**

Application No.	08/976,560
Confirmation No.	2046
Filing Date	November 24, 1997
First Named Inventor	FREIMER
Examiner.	L. Arthur
Group Art Unit	1655
Attorney Docket No.	UCAL142CON

Sir:

Applicant hereby appeals to the Board of Patent Appeals and Interferences from the decision of the examiner dated, April 24, 2001 finally rejecting claims 1-12 and 25-27:

The fee for this Notice of Appeal is: 320.00

A Petition for Extension of time from 07-24-2001 to 10-24-2001 is requested. The fee is: 920.00

Total amount to be charged to Deposit Account 50-0815 1240.00

The Commissioner is authorized to charge any fees which may be required, or credit any overpayment to Deposit Account 50-0815. If additional fees are required, including extensions of time, please consider this a petition therefore. A duplicate copy of this sheet is enclosed.

I am the: Applicant/inventor
 Assignee of record of the entire interest. See 37CFR 3.71. A Statement under 37 3.73(b) is enclosed.
 Attorney or agent of record
 Attorney or agent acting under 37 CFR 1.34(a)

Respectfully submitted,

BOZICEVIC, FIELD & FRANCIS LLP

Date: Oct. 10, 2001 By:

Paula A. Borden
Registration No. 42,344

BOZICEVIC, FIELD & FRANCIS LLP
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RECEIVED

AP-1655/16

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231.

Name (Print/Type)	Cindy Hoang	Signature	(Signature)	Date	10-10-2001
<p style="text-align: center;">TRANSMITTAL</p> <p style="text-align: center;"><input checked="" type="checkbox"/> Large Entity</p> <p style="text-align: center;"><input type="checkbox"/> Small Entity</p>		<p>Application Number 108/976,560</p> <p>Confirmation Number 2046</p> <p>Filing Date November 11, 1997</p> <p>First Named Inventor FREIMER</p> <p>Examiner L. Arthur</p> <p>Group Art 1655</p> <p>Attorney Docket No. UCAL142CON</p>			

ENCLOSED:	Claims	No. of claims as filed or after amendment	Most claims previously paid for	# Extra Claims	Rate	Totals
<input checked="" type="checkbox"/> Amendment Under Rule <input checked="" type="checkbox"/> 37 CFR § 1.116 <input checked="" type="checkbox"/> Pages 8	Total	15	20	0	18	\$ 000
	Independent	5	7	0	84	\$ -
	Multiple					
	Total Extra Claim Fees					\$ -

<input checked="" type="checkbox"/> Applicants Petition for an Extension of time from 07-24-2001	to 10-24-2001	A month extension was previously filed and paid for thereby reducing the basic fee
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<input type="checkbox"/> Response to File Missing Parts (with copy of formalities letter)	Fee
<input type="checkbox"/> Filing Fee	Fee
<input type="checkbox"/> Executed Declaration	Surcharge Fee
<input type="checkbox"/> Other	Fee
	Fee
	Fee
	Fee
	Subtotal \$ -

<input type="checkbox"/> Information Disclosure Statement	Fee
<input type="checkbox"/> PTO Form 1449	Fee
<input type="checkbox"/> Copies of Cited References	Subtotal \$ -
<input type="checkbox"/> Other	

<input type="checkbox"/> Response to Notice to Comply (with copy of Notice to Comply)	Fee
<input type="checkbox"/> Sequence Listing Certification	Fee
<input type="checkbox"/> Paper Copy of Sequence Listing	Fee
<input type="checkbox"/> Diskette in computer-readable format	Fee
<input type="checkbox"/> Other	Fee

		Fee
<input type="checkbox"/> Terminal Disclaimer		
<input type="checkbox"/> Appeal to Board of Appeals and Appeal Communication to Group		
<input checked="" type="checkbox"/> Notice of Appeal	Pages <u>1</u>	Fee <u>\$ 320.00</u>
<input type="checkbox"/> Appeal Brief in Triplicate	Pages _____	Fee _____
<input type="checkbox"/> Reply Brief	Pages _____	Fee <u>\$ -</u>
		Subtotal <u>\$ 320.00</u>
<input type="checkbox"/> Other Enclosures and/or Fees	_____	Fee _____
<input type="checkbox"/> Change of Correspondence Address		
<input checked="" type="checkbox"/> Return Receipt Postcard		TOTAL FEES <u>\$ 1,240.00</u>
<p>The Commissioner is authorized to charge any fees which may be required, or credit any overpayment to Deposit Account 50-0815. If additional fees are required, including extensions of time, please consider this a petition therefore. A duplicate copy of this transmittal is enclosed.</p>		
SIGNATURE OF APPLICANT, ATTORNEY OR AGENT REQUIRED		
Name (Print/Type)	<u>Paula A. Borden</u>	Registration No. <u>42,344</u>
Signature		Date <u>10-10-2001</u>
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